



COPY

APPLICATION FOR CERTIFICATION

Pursuant to Arizona Revised Statutes §§16-947 and 948 and AAC R2-20-104 (D)

OFFICE USE ONLY

☒ Initial Application ☐ Amended Application

FILERID
2004-93171

NAME OF CANDIDATE NANCY BUEL		OFFICE SOUGHT (include Legislative District, if applicable) HOUSE DISTRICT 8	
ADDRESS (NUMBER & STREET) 16343 E CRYSTAL RIDGE DRIVE		CITY FOUNTAIN HILLS	STATE AZ
MAILING ADDRESS (if different from above)		CITY	STATE
CANDIDATE'S TELEPHONE # 480 816 6310	CANDIDATE'S FAX # 480 816 6312	CANDIDATE'S E-MAIL ADDRESS nbuel@aol.com	
CANDIDATE'S PARTY AFFILIATION (if any) DEMOCRATIC PARTY			
NAME OF CANDIDATE'S COMMITTEE FRIENDS OF NANCY BUEL			
COMMITTEE'S ADDRESS 16343 E CRYSTAL RIDGE DRIVE		CITY FOUNTAIN HILLS	STATE AZ
COMMITTEE'S PHONE # 480 816 6310	COMMITTEE'S FAX # 480 816 6312	COMMITTEE'S E-MAIL ADDRESS nbuel@aol.com	
NAME OF DESIGNATED INDIVIDUAL WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLICABLE) (A.R.S. §16-948) NANCY BUEL			
DESIGNATED INDIVIDUAL'S ADDRESS 16343 E CRYSTAL RIDGE		CITY FOUNTAIN HILLS	STATE AZ
DESIGNATED INDIVIDUAL'S TELEPHONE # 480 816 6310	DESIGNATED INDIVIDUAL'S FAX # 480 816 6312	DESIGNATED INDIVIDUAL'S E-MAIL ADDRESS nbuel@aol.com	
LIST THE NAME OF THE FINANCIAL INSTITUTION FROM WHICH THE CANDIDATE AND THE DESIGNATED INDIVIDUAL WILL CONDUCT ALL FINANCIAL ACTIVITY FOR THE CANDIDATE'S CAMPAIGN COMMITTEE (do not list account number). (A.R.S. §16-948(A)). WELLS FARGO			

DESIGNATED CANDIDATE'S STATEMENT (if applicable) (A.R.S. §16-948(B)): I hereby designate X Not Applicable as my duly authorized Designated Individual, with the authority to withdraw funds and make expenditures from my campaign account on my behalf.

Date:

Candidate's signature:

RECEIVED

MAR 29 2004

CCEC